

Data and Information Requests by Adult MH DD Service System Work Group
(as of 8/27/09)

1. Get system values (performance and expectations) listing from DHS
2. Identify potential cost savings from combining county central point of coordination (CPC) administration or forming multicounty regions.
3. Map service delivery according to which services are being provided and how many people are being served.
4. Map by county, indicating unduplicated number of services, service population, and the general population of the county (DHS)
5. Prevalence numbers by population and disability category as compared to national prevalence numbers.
6. Provide the number of people served by disability type--use chart of accounts but also services.
7. As compared to the county general population, the number of people served by county, per capita and expenditures by county, per capita.
8. Develop a matrix that shows the current services available locally, regionally and statewide and where they are provided to determine the service gaps. Also show outcomes.
9. Identify which services have been eliminated or put on waiting lists.
10. Update previously distributed spreadsheets showing changes in county MH-DD levy rates, valuations, fund balances, and other pertinent financial information from 1996 to most current.
11. Determine status of DHS efforts to explore case rates based upon functional scores. If insufficient data available, perhaps can extrapolate from unduplicated per county, per person cost data.
12. Provide county, state, fed funding amounts for fiscal years 2009, 2010, and 2011. On federal side, significant funding such as SSI is not administered through DHS or counties --just look at those state has control over like Medicaid. Separate the enhanced federal match for Medicaid from the Federal Stimulus Package.
13. What are the total costs of ICFMR care? Private and public facilities compute this differently.
14. Identify latest out-of-state placement cost data. Under estimate discussed at meeting, out-of-state placements for children total \$7 million and for adults total \$10 million. Out-of-state placements are usually due to co-occurring conditions that cannot be addressed by facilities within the state.
15. There are 736 or so individuals on the BI waiver waiting list. To meet eligibility for this waiting list these persons must qualify for an institutional level of care. It seems reasonable to wonder how many of these individuals move into skilled care while they are waiting. If we could determine this we might learn that there is a cost savings associated with clearing some or all of the waiting list for the waiver.